LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

2005 MAR 18 AM 9:21 STATE OF TOAHO

(Type or print clearly in black ink)

	ructions at bottom of page								
Lobbyist's name and permanent business address				Date prepared			Period covered		
Joseph Colleges J. 3080 E. Esenty Way-Soile 1000 Meridien Idalo 83642							month end	ling	
3080 E. Es	ways	1. 11 100	•			(Mo.)	(Day)	(Yr.)	
dresidies -	42	3	16-05		(140.)				
				-			<u>ا ک</u>	05	
Totals of all re	eportable expenditures made or	r incurred by Lob	byist or by	Lobbyist's Empl	oyer on behalf	of Lobb	yist's Emplo	yer.	
Category of Expenditu Reimbursed Personal Living and Tr		Proportionate and Item 3, at bottom		buted by each emp	loyer (Identify e	mployer	s, under	•	
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported All Employers		Employer No			Employer N	Jo 3	Employer No. 4		
<u> </u>		Limployer	<i>y</i> : 1	imployer 140. 2	Limpioyer i	10. 3	Employe	110.4	
Entertainment Food and Refreshment	\$ 69.63	s 69.6	ӡ \$.		\$		\$		
Living Accommodations									
A dynamicin a		-			-				
Advertising	<u> </u>			<u> </u>	l ——				
Travel	140.79	190.79	2						
Telephone								 -	
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Other Expenses or Service	s			_PIIST	F 11				
т	Total \$ 260,42	\$260.4	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1001	LU		\$		
		}			"			· · · · · · · · · · · · · · · · · · ·	
	nployers you are reporting for requexpenditure of more than fifty					hould be	entered on Pag	ge 1.	
The totals of each Date	Place		mount		of Legislators & I	Public Of	ficials in Grou	p	
								<u> </u>	
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Continued on attached	page(s)		Item						
	INSTRUCTIONS		3	Er	nployer(s) Name	(s) and A	ddress(es)		
			┨┈┈	AARP -	Idah	01		- 01.	
	orm: Any lobbyist registered t	ander Section	No.1	3080100	E. Eja	1/2	wa-	7-5te1	
67-6617 Idaho Code.				rr winter	1-1-46	<i>~ •</i>			
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.									
TO BE FILED WITH:									
Ben Ysursa									
Secretary of State PO Box 83720									
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282									
Pnone: (20)	o) 554-2852 Pax: (208) 334-2	2202	Ī						

Item 4	Expenditures personal prop	made by the lob erty to any Legis	ade by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible ty to any Legislator, or for or on behalf of any legislator.									
•			Name of Legislator Receiving or Benefited									
Item 4 Subjec (from	Subject matter or House Bill, the Lobbyist w	of proposed legislat Resolution or other vas supporting or of esolution or Other tive Ident. Number	ion, the number of the Senate	any le	gislator.	or Bene	IDENTIFICATION Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper,					
						31	power, CATV, gas Other (please specify)					

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.

Lobbyis signature

Date